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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

02/25/02  
J0542 U.S. PTO

In re Application of:

Atsushi Miyake et al.

Serial No.: Unknown

Examiner: Unknown

Filing Date: February 25, 2002

Group Art Unit: Unknown

For: METHOD AND APPARATUS FOR ALIGNING AN OPTICAL DEVICE

Docket No.: 1018.1132101

J1046 U.S. PTO  
10/084785  
02/25/02

**TRANSMITTAL SHEET**

Box Patent Application  
The Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

**CERTIFICATE UNDER 37 C.F.R. 1.10.** The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EL855119995US, in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231 on this 25th day of February, 2002.

By Kathleen L. Boekley  
Kathleen L. Boekley

We are transmitting herewith the attached Patent Application including the following:

- ☒ [ XX ] THIRTY-FOUR (34) sheet(s) of specification.
- ☒ [ XX ] THIRTY-THREE (33) claim(s).
- ☒ [ XX ] ONE (1) sheet(s) of Abstract.
- ☒ [ XX ] NINE (9) sheet(s) of formal drawings.
- ☒ [ XX ] Executed Declaration and Power of Attorney.
- ☐ [ ] A verified statement(s) to establish small entity status under 37 C.F.R. 1.9 and/or 1.27 is enclosed.
- ☒ [ XX ] An Assignment of the invention to Nippon Sheet Glass Co., Ltd., is being filed contemporaneous with this patent application.
- ☒ [ XX ] A certified copy of a Japanese application, serial no. 2001-053401, filed February 28, 2001, the right of priority of which is claimed under 35 U.S.C. §119.

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# CLAIMS AS FILED

	(1)	(2)	SMALL ENTITY		OTHER	
FOR:	# FILED	# EXTRA	Rate	Fee	Rate	Fee
BASIC FEE	1	0		\$370		\$740
TOTAL CLAIMS	33-20 =	13	X9=	\$	X18=	\$234
INDEPENDENT CLAIMS	9-3 =	6	X42=	\$	X84=	\$504
( ) MULTIPLE DEPENDENT CLAIM PRESENTED			+140=	\$	+280=	\$0
TOTAL			\$		\$1,478	

\*If the difference in Column (1) is less than zero, enter "0" in Column 2.

[ ] Other \_\_\_\_\_.

[XX] A check in the amount of \$1,478.00 is enclosed.

[XXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By:

David M. Crompton

Reg. No. 36,772

David M. Crompton  
 CROMPTON, SEAGER & TUFTE, LLC  
 331 Second Avenue South, Suite 895  
 Minneapolis, Minnesota 55401-2246  
 Telephone: (612) 677-9050  
 Facsimile: (612) 359-9349